

RECEIVED
CENTRAL FAX CENTER**LAW OFFICES OF BRIAN S. STEINBERGER, P. A.** JAN 27 2006Registered Patent Attorneys
101 Brevard Avenue Cocoa, Florida 32922
Phone (321) 633-5080 Fax (321) 633-9322
Email brian@sste.comBrian S. Steinberger (Member FL, PA Bars)*
Roland Dexter (Member TX, MA Bars)*
Joyce P. Morlin (Member FL, MI, IN, NY Bars)*
Phyllis K. Wood (Member FL Bar)*
of Counsel
Frances L. Olmsted (Member NY Bar)*
* Registered Patent AttorneyCommissioner for Patents
P O Box 1450
Alexandria, VA 22313-1450In re application of: Joseph R. Moody
Patent Application No. 10/725,082
Filed 12/02/2003
For: Fore grip with bipod
Attorney Docket No.: PC-2042

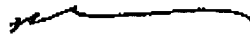
Gentlemen:

Enclosed please find a Revocation of Attorney by Assignee/Revocation of Prior Powers and new Power of Attorney, and
a return post card

Please direct all future communications regarding the above referenced patent to the undersigned.

Also, please change the Attorney Docket Number from D-7638 to PC-2042

Sincerely,



Brian S. Steinberger
Registration No. 36,423 Client NO.: 23717
101 Brevard Avenue
Cocoa, FL 32922
(321)633-5080

CERTIFICATE OF TRANSMISSION (37 CFR 1.8a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being sent by facsimile to: 571-273-8300
Commissioner for Patents, Patent and Trademark Office, P O Box 1450, Alexandria, VA 22313-1450

Date

1/27/06

Brian S. Steinberger
(Name of Person Mailing Paper)
(Signature of Person Mailing Paper)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid control number.

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/725,082
Filing Date	12/02/2003
First Named Inventor	Joseph R. Moody
Art Unit	3841
Examiner Name	Michelle Renee Clement
Attorney Docket Number	PG-2042

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

23,717

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

23,717

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Joseph R. Moody

Date

1/27/06

Telephone

904/287/2272

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9129 and select option 2.